
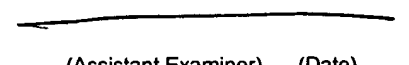
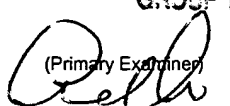




Issue Classification 	Application No.	Applicant(s)	
	09/640,526	NICOLSON ET AL.	
	Examiner	Art Unit	
	Edward J. Cain	1714	

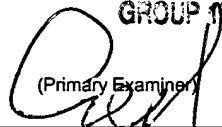

ISSUE CLASSIFICATION										
ORIGINAL					CROSS REFERENCE(S)					
CLASS	SUBCLASS				CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)				
523	106				523	107	108			
INTERNATIONAL CLASSIFICATION										
C	0	8	K	3/00						
				/						
				/						
				/						
				/						

 (Assistant Examiner) (Date)		EDWARD J. CAIN PRIMARY EXAMINER GROUP 1800  (Primary Examiner) (Date)		Total Claims Allowed: 100	
 (Legal Instruments Examiner) (Date)				O.G. Print Claim(s) 1	O.G. Print Fig. none

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
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	2		32		62		122
	3		33		63		123
	4		34		64		124
	5		35		65		125
	6		36		66		126
	7		37		67		127
	8		38		68		128
	9		39		69		129
	10		40		70	1	159
	11		41		71	2	160
	12		42		72	3	161
	13		43		73	4	162
	14		44		74	5	163
	15		45		75	6	164
	16		46		76	7	165
	17		47		77	8	166
	18		48		78	9	167
	19		49		79	10	168
	20		50		80	11	169
	21		51		81	12	170
	22		52		82	13	171
	23		53		83	14	172
	24		54		84	15	173
	25		55		85	16	174
	26		56		86	17	175
	27		57		87	18	176
	28		58		88	19	177
	29		59		89	20	178
	30		60		90	21	179
					120	22	180
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Issue Classification 	Application No.	Applicant(s)	
	09/640,526	NICOLSON ET AL.	
	Examiner	Art Unit	
	Edward J. Cain	1714	

pg 2

ISSUE CLASSIFICATION												
ORIGINAL				CROSS REFERENCE(S)								
CLASS		SUBCLASS		CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)							
INTERNATIONAL CLASSIFICATION												
			/									
			/									
			/									
			/									
			/									
				EDWARD J. CAIN PRIMARY EXAMINER GROUP 1800				Total Claims Allowed: 100				
(Assistant Examiner) (Date)				 (Primary Examiner) (Date)				O.G. Print Claim(s)		O.G. Print Fig.		
 Legal Instruments Examiner (Date)								1		none		

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant												<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original
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54	212	84	242		272		302		332		362		392				
55	213	85	243		273		303		333		363		393				
56	214	86	244		274		304		334		364		394				
57	215	87	245		275		305		335		365		395				
58	216	88	246		276		306		336		366		396				
59	217	89	247		277		307		337		367		397				
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66	224	96	254		284		314		344		374		404				
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81	239		269		299		329		359		389		419				
82	240		270		300		330		360		390		420				